

Constructed Wetlands Inspections and Maintenance Checklist

Site Name: _____ Owner Change since last inspection? _____

Location: _____

Owner Name: _____

Address _____ Phone Number _____

Site Status: _____

Date: _____ Time: _____ Site conditions: _____

Constructed Wetland Type: ED Wetland Pocket Wetland Wetland

Inspection Frequency Key: A=annual; M=monthly; S=after major storms

Inspection Items	Inspection Frequency	Inspected? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
Embankment and Emergency Spillway				
Vegetation healthy?	A/S			
Erosion on embankment?	A/S			
Animal burrows in embankment?	A/S			
Cracking, sliding, bulging of dam?	A/S			
Drains blocked or not functioning?	A/S			
Leaks or seeps on embankment?	A/S			
Slope protection failure functional?	A/S			
Emergency spillway obstructed?	A/S			
Erosion in/around emergency spillway?	A/S			
Other (describe)	A/S			
Riser and Principal Spillway				(describe type: concrete pipe, slotted weir, channel, etc.)
Low-flow orifice functional?	A/S			
Trash rack (Debris removal needed? Corrosion noted?)	A/S			
Sediment buildup in riser?	A			
Concrete/masonry condition (Cracks or displacement? Spalling?)	A			
Metal pipe in good condition?	A			
Control valve operation?	A			
Pond drain valve operation?	A			
Outfall channels function, not eroding?	A			
Other (describe)	A			

**Hamilton County Water
Quality Department
(423) 209-7852**

Inspection Items	Inspection Frequency	Inspected? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
Sediment Forebays				
Sedimentation description				
Sediment cleanout needed (over 50 percent full)?	A/S			
Constructed Wetland Ponding Areas				
Wetland vegetation present and healthy?	M			
Vegetation removal needed?	A/M			
Floatable debris removal needed?	M			
Visible pollution?	M			
Shoreline problem?	M			
Erosion at outfalls into pond?	M			
Headwalls and endwalls in good condition?	M			
Encroachment into pond or easement area?	M			
Hazards				
Have there been complaints from residents?	M			
Public hazards noted?	M			

Inspector Comments: _____

Overall Condition of Facility: Acceptable Unacceptable

If any of the above Inspection Items are checked "Yes" for "Maintenance Needed," list Maintenance actions and their completion dates below:

Maintenance Action Needed	Due Date

The next routine inspection is scheduled for approximately: _____
 (date)

Inspected by: (signature) _____
Inspected by: (printed) _____